

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Montgomery Advertiser
P.O. Box 1000
Montgomery, AL 36101-1000
Attn: Legal Ads

2. Article Number

7001 1140 0001 8579 6837

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Gary Edwards ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Gary Edwards ☐ C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

543.190, AL's BP *NC*

102595-02-M-154C

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See instructions for "Service of Process by U.S. Marshal"

8 ✓

PLAINTIFF
UNITED STATES OF AMERICA

RECEIVED

COURT CASE NUMBER

2:06CV116-MEF

DEFENDANT

Five Hundred Forty-Three Thousand One Hundred Ninety Dollars (\$543,190.00) in U.S. C

TYPE OF PROCESS

NOTICE

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

MONTGOMERY ADVERTISER DEBRA P. HACKETT, CLK

ADDRESS (Street or RFD, Apartment No., City, State and Zip Code)

P. O. BOX 1000; MONTGOMERY AL 36101-1000

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

UNITED STATES ATTORNEY OFFICE
JOHN T. HARMON, AUSA
P. O. BOX 197
MONTGOMERY AL 36101-0197

Number of process to be served with this Form 285

1

Number of parties to be served in this case

1

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

*CATS 05-DEA-456576

PUBLISH ONCE A WEEK FOR THREE CONSECUTIVE WEEKS

Signature of Attorney or other Originator requesting service on behalf of:

John T. Harmon

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

(334) 223-7280

DATE

02/28/06

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

No. 2

District to Serve

No. 2

Signature of Authorized USMS Deputy or Clerk

K. Chavers

Date

2/28/06

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Date

4/28/06

Time

12:00

☐ am
☒ pm

Signature of U.S. Marshal or Deputy

K. Chavers

Service Fee

45.00

Total Mileage Charges including endeavors)

Forwarding Fee

8.00

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or (Amount of Refund*)

MAY - 5 2006

REMARKS: 3/14/06 C.M. # 7001 1140 0001 8579 6837

To be published 3/17, 3/24, 3/31/06

3/17/06 Received green card signed Gary Edwards

CLERK
U.S. DISTRICT COURT
MIDDLE DIST. OF ALA.

PRIOR EDITIONS
MAY BE USED

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

FORM USM-285
Rev. 12/15/80
Automated 01/00

Invoice